

FORM 1	 EPA	ENVIRONMENTAL PROTECTION AGENCY GENERAL INFORMATION Consolidated Permits Program (Read the "General Instructions" before starting.)	I. EPA I.D. NUMBER FTND 0033754413D
LABEL ITEMS I. EPA I.D. NUMBER III. FACILITY NAME V. FACILITY MAILING ADDRESS VI. FACILITY LOCATION		000460 RECEIVED PLEASE PLACE LABEL IN THIS SPACE SEP 14 4 17 PM '80 ENFORCEMENT	

GENERAL INSTRUCTIONS

If a preprinted label has been provided, affix it in the designated space. Review the information carefully; if any of it is incorrect, cross through it and enter the correct data in the appropriate fill-in area below. Also, if any of the preprinted data is absent (the area to the left of the label space lists the information that should appear), please provide it in the proper fill-in area(s) below. If the label is complete and correct, you need not complete Items I, III, V, and VI (except VI-B which must be completed regardless). Complete all items if no label has been provided. Refer to the instructions for detailed item descriptions and for the legal authorizations under which this data is collected.

II. POLLUTANT CHARACTERISTICS

INSTRUCTIONS: Complete A through J to determine whether you need to submit any permit application forms to the EPA. If you answer "yes" to any questions, you must submit this form and the supplemental form listed in the parenthesis following the question. Mark "X" in the box in the third column if the supplemental form is attached. If you answer "no" to each question, you need not submit any of these forms. You may answer "no" if your activity is excluded from permit requirements; see Section C of the instructions. See also, Section D of the instructions for definitions of bold-faced terms.

SPECIFIC QUESTIONS	MARK "X"			SPECIFIC QUESTIONS	MARK "X"		
	YES	NO	FORM ATTACHED		YES	NO	FORM ATTACHED
A. Is this facility a publicly owned treatment works which results in a discharge to waters of the U.S.? (FORM 2A)		X		B. Does or will this facility (either existing or proposed) include a concentrated animal feeding operation or aquatic animal production facility which results in a discharge to waters of the U.S.? (FORM 2B)		X	
C. Is this a facility which currently results in discharges to waters of the U.S. other than those described in A or B above? (FORM 2C)		X		D. Is this a proposed facility (other than those described in A or B above) which will result in a discharge to waters of the U.S.? (FORM 2D)		X	
E. Does or will this facility treat, store, or dispose of hazardous wastes? (FORM 3)	X			F. Do you or will you inject at this facility industrial or municipal effluent below the lowermost stratum containing, within one quarter mile of the well bore, underground sources of drinking water? (FORM 4)		X	
G. Do you or will you inject at this facility any produced water or other fluids which are brought to the surface in connection with conventional oil or natural gas production, inject fluids used for enhanced recovery of oil or natural gas, or inject fluids for storage of liquid hydrocarbons? (FORM 4)		X		H. Do you or will you inject at this facility fluids for special processes such as mining of sulfur by the Frasch process, solution mining of minerals, in situ combustion of fossil fuel, or recovery of geothermal energy? (FORM 4)		X	
I. Is this facility a proposed stationary source which is one of the 28 industrial categories listed in the instructions and which will potentially emit 100 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X		J. Is this facility a proposed stationary source which is NOT one of the 28 industrial categories listed in the instructions and which will potentially emit 250 tons per year of any air pollutant regulated under the Clean Air Act and may affect or be located in an attainment area? (FORM 5)		X	

III. NAME OF FACILITY

1	SKIP	HUYCK FORMEX DIVISION OF BTR PAPER GROUP
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IV. FACILITY CONTACT

A. NAME & TITLE (last, first, & title)	B. PHONE (area code & no.)
2 MILLER JD MAINTENANCE MANAGER	615 639 1181

V. FACILITY MAILING ADDRESS

A. STREET OR P.O. BOX	B. CITY OR TOWN
3 P O BOX 330	4 GREENEVILLE
C. STATE D. ZIP CODE	
TN 37743	

VI. FACILITY LOCATION

A. STREET, ROUTE NO. OR OTHER SPECIFIC IDENTIFIER	B. COUNTY NAME
5 AUSTIN ST	GREENE
C. CITY OR TOWN	D. STATE E. ZIP CODE F. COUNTY CODE (if known)
GREENEVILLE	TN 37743

VII. SIC CODES (4-digit, in order of priority)

A. FIRST										B. SECOND											
C	7	2	2	2	1	(specify) Fabrics - broad woven, man-made fibers					C	7	(specify)								
C. THIRD										D. FOURTH											
C	7	(specify)									C	7	(specify)								

VIII. OPERATOR INFORMATION

A. NAME																																																		B. Is the name listed in Item VIII-A also the owner?																			
C	8	HUYCK FORMEX DIVISION OF BTR PAPER GROUP																																																<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO																			
C. STATUS OF OPERATOR (Enter the appropriate letter into the answer box; if "Other", specify.)																														D. PHONE (area code & no.)																																							
F = FEDERAL										M = PUBLIC (other than federal or state)										P = PRIVATE										O = OTHER (specify)										P										(specify)										615 639 1181									
E. STREET OR P.O. BOX																														P O BOX 330																																							
F. CITY OR TOWN																				G. STATE										H. ZIP CODE										IX. INDIAN LAND																													
B GREENEVILLE																				TN										37743										Is the facility located on Indian lands?																													
																																								<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO																													

X. EXISTING ENVIRONMENTAL PERMITS

A. NPDES (Discharges to Surface Water)															D. PSD (Air Emissions from Proposed Sources)														
C	9	N													C	9	P												
B. UIC (Underground Injection of Fluids)															E. OTHER (specify)														
C	9	U													C	9	0102301												
C. RCRA (Hazardous Wastes)															E. OTHER (specify)														
C	9	R													C	9													

(specify) Tenn. Air Pollution Control Board

XI. MAP

Attach to this application a topographic map of the area extending to at least one mile beyond property boundaries. The map must show the outline of the facility, the location of each of its existing and proposed intake and discharge structures, each of its hazardous waste treatment, storage, or disposal facilities, and each well where it injects fluids underground. Include all springs, rivers and other surface water bodies in the map area. See instructions for precise requirements.

XII. NATURE OF BUSINESS (provide a brief description)

Manufacture of industrial forming fabrics for use on paper machines.

XIII. CERTIFICATION (see instructions)

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this application and all attachments and that, based on my inquiry of those persons immediately responsible for obtaining the information contained in the application, I believe that the information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME & OFFICIAL TITLE (type or print)	B. SIGNATURE	C. DATE SIGNED
C. E. OLSON Vice Pres MANUFACTURING	C. E. Olson	Aug 13, 1981

COMMENTS FOR OFFICIAL USE ONLY

C



HAZARDOUS WASTE PERMIT APPLICATION

(This information is required under Section 3005 of RCRA.)

Form Approved OMB No. 158-S80004

I. EPA I.D. NUMBER														
S	F	T	N	D	0	0	3	3	7	5	4	4	1	T/A/C
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15

FOR OFFICIAL USE ONLY

APPLICATION APPROVED	DATE RECEIVED (yr., mo., & day)
23	24 25 26 27 28 29

COMMENTS

II. FIRST OR REVISED APPLICATION

Place an "X" in the appropriate box in A or B below (mark one box only) to indicate whether this is the first application you are submitting for your facility or a revised application. If this is your first application and you already know your facility's EPA I.D. Number, or if this is a revised application, enter your facility's EPA I.D. Number in Item I above.

A. FIRST APPLICATION (place an "X" below and provide the appropriate date)

☒ 1. EXISTING FACILITY (See instructions for definition of "existing" facility. Complete item below.)

☐ 2. NEW FACILITY (Complete item below.)

FOR EXISTING FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR THE DATE CONSTRUCTION COMMENCED (use the boxes to the left)

YR.	MO.	DAY
8	7	1
15	73	74

FOR NEW FACILITIES, PROVIDE THE DATE (yr., mo., & day) OPERATION BEGAN OR IS EXPECTED TO BEGIN

YR.	MO.	DAY
73	74	75

B. REVISED APPLICATION (place an "X" below and complete Item I above)

☐ 1. FACILITY HAS INTERIM STATUS

☐ 2. FACILITY HAS A RCRA PERMIT

III. PROCESSES - CODES AND DESIGN CAPACITIES

A. PROCESS CODE - Enter the code from the list of process codes below that best describes each process to be used at the facility. Ten lines are provided for entering codes. If more lines are needed, enter the code(s) in the space provided. If a process will be used that is not included in the list of codes below, then describe the process (including its design capacity) in the space provided on the form (Item III-C).

B. PROCESS DESIGN CAPACITY - For each code entered in column A enter the capacity of the process.

1. AMOUNT - Enter the amount.

2. UNIT OF MEASURE - For each amount entered in column B(1), enter the code from the list of unit measure codes below that describes the unit of measure used. Only the units of measure that are listed below should be used.

PROCESS CODE APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY

Storage:
CONTAINER (barrel, drum, etc.) S01 GALLONS OR LITERS
TANK S02 GALLONS OR LITERS
WASTE PILE S03 CUBIC YARDS OR CUBIC METERS
SURFACE IMPOUNDMENT S04 GALLONS OR LITERS

Disposal:
INJECTION WELL D79 GALLONS OR LITERS
LANDFILL D80 ACRE-FEET (the volume that would cover one acre to a depth of one foot) OR HECTARE-METER
LAND APPLICATION D81 ACRES OR HECTARES
OCEAN DISPOSAL D82 GALLONS PER DAY OR LITERS PER DAY
SURFACE IMPOUNDMENT D83 GALLONS OR LITERS

UNIT OF MEASURE CODE

UNIT OF MEASURE

GALLONS G
LITERS L
CUBIC YARDS Y
CUBIC METERS C
GALLONS PER DAY U

UNIT OF MEASURE

LITERS PER DAY V
TONS PER HOUR D
METRIC TONS PER HOUR W
GALLONS PER HOUR E
LITERS PER HOUR H

PROCESS CODE

Treatment:

TANK
SURFACE IMPOUNDMENT
INCINERATOR

OTHER (Use for physical, chemical, thermal or biological treatment processes not occurring in tanks, surface impoundments or incinerators. Describe the processes in the space provided; Item III-C.)

PROCESS CODE

APPROPRIATE UNITS OF MEASURE FOR PROCESS DESIGN CAPACITY

T01 GALLONS PER DAY OR LITERS PER DAY
T02 GALLONS PER DAY OR LITERS PER DAY
T03 TONS PER HOUR OR METRIC TONS PER HOUR
T04 GALLONS PER HOUR OR LITERS PER HOUR

UNIT OF MEASURE

ACRE-FEET A
HECTARE-METER F
ACRES B
HECTARES Q

EXAMPLE FOR COMPLETING ITEM III (shown in line numbers X-1 and X-2 below): A facility has two storage tanks, one tank can hold 200 gallons and the other can hold 400 gallons. The facility also has an incinerator that can burn up to 20 gallons per hour.

DUP

LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY	LINE NUMBER	A. PROCESS CODE (from list above)	B. PROCESS DESIGN CAPACITY		FOR OFFICIAL USE ONLY
		1. AMOUNT (specify)	2. UNIT OF MEASURE (enter code)				1. AMOUNT	2. UNIT OF MEASURE (enter code)	
X-1	S 0 2	600	G		5				
X-2	T 0 3	20	E		6				
1	S 0 2	3300	G		7				
2	T 0 3	50	E		8				
3					9				
4					10				

III. PROCESSES (continued)

C. SPACE FOR ADDITIONAL PROCESS CODES OR FOR DESCRIBING OTHER PROCESSES (code "T04"). FOR EACH PROCESS ENTERED HERE INCLUDE DESIGN CAPACITY.

IV. DESCRIPTION OF HAZARDOUS WASTES

A. EPA HAZARDOUS WASTE NUMBER — Enter the four-digit number from 40 CFR, Subpart D for each listed hazardous waste you will handle. If you handle hazardous wastes which are not listed in 40 CFR, Subpart D, enter the four-digit number(s) from 40 CFR, Subpart C that describes the characteristics and/or the toxic contaminants of those hazardous wastes.

B. ESTIMATED ANNUAL QUANTITY — For each listed waste entered in column A estimate the quantity of that waste that will be handled on an annual basis. For each characteristic or toxic contaminant entered in column A estimate the total annual quantity of all the non-listed waste(s) that will be handled which possess that characteristic or contaminant.

C. UNIT OF MEASURE — For each quantity entered in column B enter the unit of measure code. Units of measure which must be used and the appropriate codes are:

ENGLISH UNIT OF MEASURE	CODE
POUNDS	P
TONS	T

METRIC UNIT OF MEASURE	CODE
KILOGRAMS	K
METRIC TONS	M

If facility records use any other unit of measure for quantity, the units of measure must be converted into one of the required units of measure taking into account the appropriate density or specific gravity of the waste.

D. PROCESSES

1. PROCESS CODES:

For listed hazardous waste: For each listed hazardous waste entered in column A select the code(s) from the list of process codes contained in Item III to indicate how the waste will be stored, treated, and/or disposed of at the facility.

For non-listed hazardous wastes: For each characteristic or toxic contaminant entered in column A, select the code(s) from the list of process codes contained in Item III to indicate all the processes that will be used to store, treat, and/or dispose of all the non-listed hazardous wastes that possess that characteristic or toxic contaminant.

Note: Four spaces are provided for entering process codes. If more are needed: (1) Enter the first three as described above; (2) Enter "000" in the extreme right box of Item IV-D(1); and (3) Enter in the space provided on page 4, the line number and the additional code(s).

2. PROCESS DESCRIPTION: If a code is not listed for a process that will be used, describe the process in the space provided on the form.

NOTE: HAZARDOUS WASTES DESCRIBED BY MORE THAN ONE EPA HAZARDOUS WASTE NUMBER — Hazardous wastes that can be described by more than one EPA Hazardous Waste Number shall be described on the form as follows:

1. Select one of the EPA Hazardous Waste Numbers and enter it in column A. On the same line complete columns B, C, and D by estimating the total annual quantity of the waste and describing all the processes to be used to treat, store, and/or dispose of the waste.
2. In column A of the next line enter the other EPA Hazardous Waste Number that can be used to describe the waste. In column D(2) on that line enter "included with above" and make no other entries on that line.
3. Repeat step 2 for each other EPA Hazardous Waste Number that can be used to describe the hazardous waste.

EXAMPLE FOR COMPLETING ITEM IV (shown in line numbers X-1, X-2, X-3, and X-4 below) — A facility will treat and dispose of an estimated 900 pounds per year of chrome shavings from leather tanning and finishing operation. In addition, the facility will treat and dispose of three non-listed wastes. Two wastes are corrosive only and there will be an estimated 200 pounds per year of each waste. The other waste is corrosive and ignitable and there will be an estimated 100 pounds per year of that waste. Treatment will be in an incinerator and disposal will be in a landfill.

LINE NO.	A. EPA HAZARDOUS WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES	
				1. PROCESS CODES (enter)	2. PROCESS DESCRIPTION (if a code is not entered in D(1))
X-1	K 0 5 4	900	P	T 0 3 D 8 0	
X-2	D 0 0 2	400	P	T 0 3 D 8 0	
X-3	D 0 0 1	100	P	T 0 3 D 8 0	
X-4	D 0 0 2				included with above

NOTE: Photocopy this page before completing if you have more than 26 wastes to list.

Form Approved OMB No. 158-S80004

EPA I.D. NUMBER (enter from page 1)													FOR OFFICIAL USE ONLY									
W T N D 0 0 3 3 7 5 4 4 1 3 1													W 1 2 DUP 2 DUP									
IV. DESCRIPTION OF HAZARDOUS WASTES (continued)																						
LINE NO.	A. EPA HAZARD. WASTE NO. (enter code)	B. ESTIMATED ANNUAL QUANTITY OF WASTE	C. UNIT OF MEASURE (enter code)	D. PROCESSES																		
				1. PROCESS CODES (enter)								2. PROCESS DESCRIPTION (if a code is not entered in D(1))										
23	24	25	26	27	28	29	30	31	32	33	34	35	36	37	38	39	40	41	42	43	44	45
1	K 0 7 0	115,200	P	S	0	2	T	0	3													
2	U 0 0 9	180	P	S	0	2	T	0	3													
3	U 0 7 8	270	P	S	0	2	T	0	3													
4	U 1 2 2	90	P	S	0	2	T	0	3													
5	U 1 5 4	135	P	S	0	2	T	0	3													
6	U 2 0 1	90	P	S	0	2	T	0	3													
7																						
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000462
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 EPA/REGION IV
 SEP 14 7 17 PM '82
 DIRECTOR

IV. DESCRIPTION OF HAZARDOUS WASTES (continued)

E. USE THIS SPACE TO LIST ADDITIONAL PROCESS CODES FROM ITEM D(1) ON PAGE 3.

EPA I.D. NO. (enter from page 1)

S	F	1	N	D	0	0	3	3	7	5	4	4	1	3	6
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16

V. FACILITY DRAWING

All existing facilities must include in the space provided on page 5 a scale drawing of the facility (see instructions for more detail).

VI. PHOTOGRAPHS

All existing facilities must include photographs (aerial or ground-level) that clearly delineate all existing structures; existing storage, treatment and disposal areas; and sites of future storage, treatment or disposal areas (see instructions for more detail).

VII. FACILITY GEOGRAPHIC LOCATION

LATITUDE (degrees, minutes, & seconds)

LONGITUDE (degrees, minutes, & seconds)

3	6	1	0	2	2
65	66	67	68	69	71

8	2	4	8	5	8
72	74	75	76	77	79

VIII. FACILITY OWNER

☒ A. If the facility owner is also the facility operator as listed in Section VIII on Form 1, "General Information", place an "X" in the box to the left and skip to Section IX below.

B. If the facility owner is not the facility operator as listed in Section VIII on Form 1, complete the following items:

1. NAME OF FACILITY'S LEGAL OWNER

2. PHONE NO. (area code & no.)

15	16	3	6	1	0	2	2	55	56	58	59	61	62	69
12	13	14	15	16	17	18	19	20	21	22	23	24	25	26

3. STREET OR P.O. BOX

4. CITY OR TOWN

5. ST.

6. ZIP CODE

IX. OWNER CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

C. E. O'Brien
Vice-Pres. Manufacturing

B. SIGNATURE

C. E. O'Brien

C. DATE SIGNED

Aug. 13, 1981

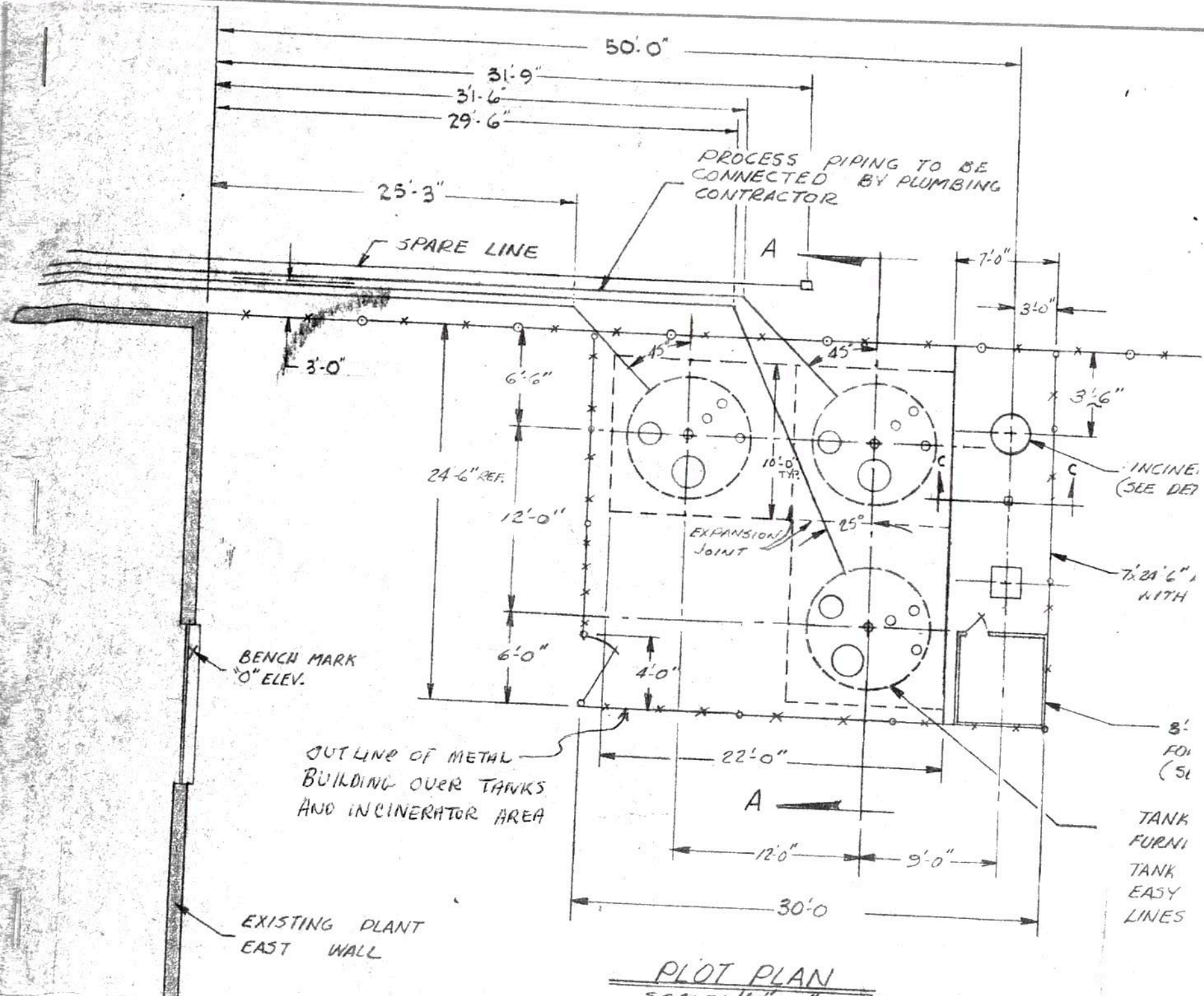
X. OPERATOR CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

A. NAME (print or type)

B. SIGNATURE

C. DATE SIGNED





U.S. ENVIRONMENTAL PROTECTION AGENCY
NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

Approved UMB No. 158-S79016
CSA No. 0246-EPA-OT

INSTRUCTIONS: If you received a preprinted label, affix it in the space at left. If any of the information on the label is incorrect, draw a line through it and supply the correct information in the appropriate section below. If the label is complete and correct, leave Items I, II, and III below blank. If you did not receive a preprinted label, complete all items. "Installation" means a single site where hazardous waste is generated, treated, stored and/or disposed of, or a transporter's principal place of business. Please refer to the INSTRUCTIONS FOR FILING NOTIFICATION before completing this form. The information requested herein is required by law (Section 3010 of the Resource Conservation and Recovery Act).

000023

PLEASE PLACE LABEL IN THIS SPACE
RECEIVED
EPA/REGION IV

FEB 23 10 53 AM '80

FOR OFFICIAL USE ONLY

ENCLOSURE

DIVISION

COMMENTS

INSTALLATION'S EPA I.D. NUMBER

APPROVED

DATE RECEIVED

(yr, mo., & day)

TW D0033754413

8/02/80

I. NAME OF INSTALLATION

HUYCK FORMEX

II. INSTALLATION MAILING ADDRESS

STREET OR P.O. BOX

PO BOX 330

CITY OR TOWN

GREENEVILLE

ST.

ZIP CODE

TN 37743

III. LOCATION OF INSTALLATION

STREET OR ROUTE NUMBER

AUSTIN STREET

CITY OR TOWN

GREENEVILLE

ST.

ZIP CODE

TN 37743

IV. INSTALLATION CONTACT

NAME AND TITLE (last, first, & job title)

MILLER JD MAINTENANCE MANAGER

PHONE NO. (area code & no.)

615-639-1181

V. OWNERSHIP

A. NAME OF INSTALLATION'S LEGAL OWNER

BTR INC

B. TYPE OF OWNERSHIP

(enter the appropriate letter into box)

F = FEDERAL
M = NON-FEDERAL

M

VI. TYPE OF HAZARDOUS WASTE ACTIVITY (enter "X" in the appropriate box(es))

☐ A. GENERATION

☐ B. TRANSPORTATION (complete item VII)

☒ C. TREAT/STORE/DISPOSE

☐ D. UNDERGROUND INJECTION

VII. MODE OF TRANSPORTATION (transporters only - enter "X" in the appropriate box(es))

☐ A. AIR

☐ B. RAIL

☐ C. HIGHWAY

☐ D. WATER

☐ E. OTHER (specify):

VIII. FIRST OR SUBSEQUENT NOTIFICATION

Mark "X" in the appropriate box to indicate whether this is your installation's first notification of hazardous waste activity or a subsequent notification. If this is not your first notification, enter your installation's EPA I.D. Number in the space provided below.

☒ A. FIRST NOTIFICATION

☐ B. SUBSEQUENT NOTIFICATION (complete item C)

C. INSTALLATION'S EPA I.D. NO.

IX. DESCRIPTION OF HAZARDOUS WASTES

Please go to the reverse of this form and provide the requested information.

EPA Form 8700-12 (6-80)

CONTINUE ON REVERSE

WTP D003875/K/121

IX. DESCRIPTION OF HAZARDOUS WASTES (continued from front)

A. HAZARDOUS WASTES FROM NON-SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.31 for each listed hazardous waste from non-specific sources your installation handles. Use additional sheets if necessary.

1	2	3	4	5	6
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
7	8	9	10	11	12
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

B. HAZARDOUS WASTES FROM SPECIFIC SOURCES. Enter the four-digit number from 40 CFR Part 261.32 for each listed hazardous waste from specific industrial sources your installation handles. Use additional sheets if necessary.

13	14	15	16	17	18
K 070	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
19	20	21	22	23	24
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
25	26	27	28	29	30
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

C. COMMERCIAL CHEMICAL PRODUCT HAZARDOUS WASTES. Enter the four-digit number from 40 CFR Part 261.33 for each chemical substance your installation handles which may be a hazardous waste. Use additional sheets if necessary.

31	32	33	34	35	36
U 009	U 078	U 122	U 154	U 201	23 - 26
37	38	39	40	41	42
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26
43	44	45	46	47	48
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

D. LISTED INFECTIOUS WASTES. Enter the four-digit number from 40 CFR Part 261.34 for each listed hazardous waste from hospitals, veterinary hospitals, medical and research laboratories your installation handles. Use additional sheets if necessary.

49	50	51	52	53	54
23 - 26	23 - 26	23 - 26	23 - 26	23 - 26	23 - 26

E. CHARACTERISTICS OF NON-LISTED HAZARDOUS WASTES. Mark "X" in the boxes corresponding to the characteristics of non-listed hazardous wastes your installation handles. (See 40 CFR Parts 261.21 - 261.24.)

☐ 1. IGNITABLE
(D001)

☐ 2. CORROSIVE
(D002)

☐ 3. REACTIVE
(D003)

☒ 4. TOXIC
(D000)

X. CERTIFICATION

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this and all attached documents, and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the submitted information is true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE

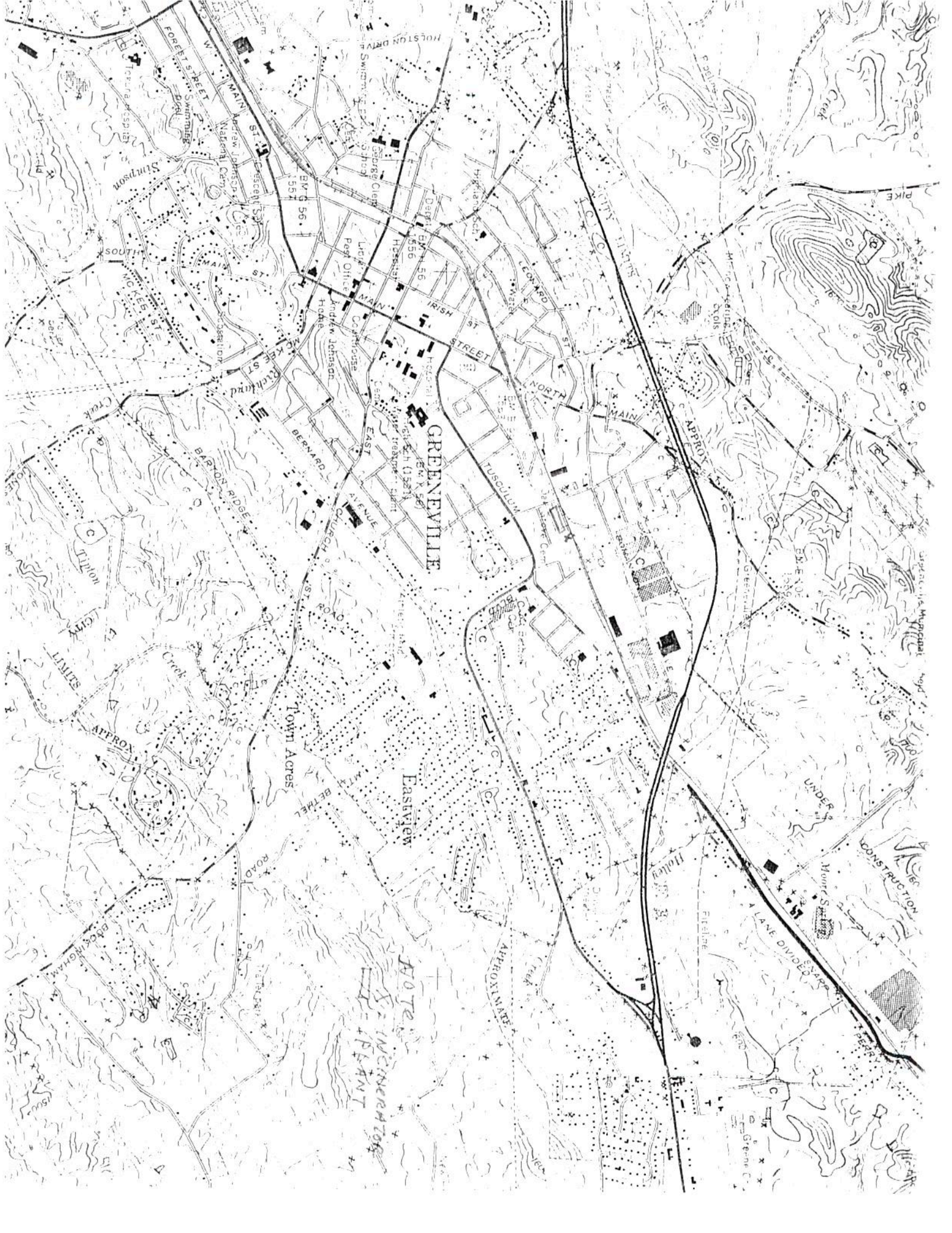
J. D. Miller

NAME & OFFICIAL TITLE (type or print)

J. D. Miller
Maintenance Manager

DATE SIGNED

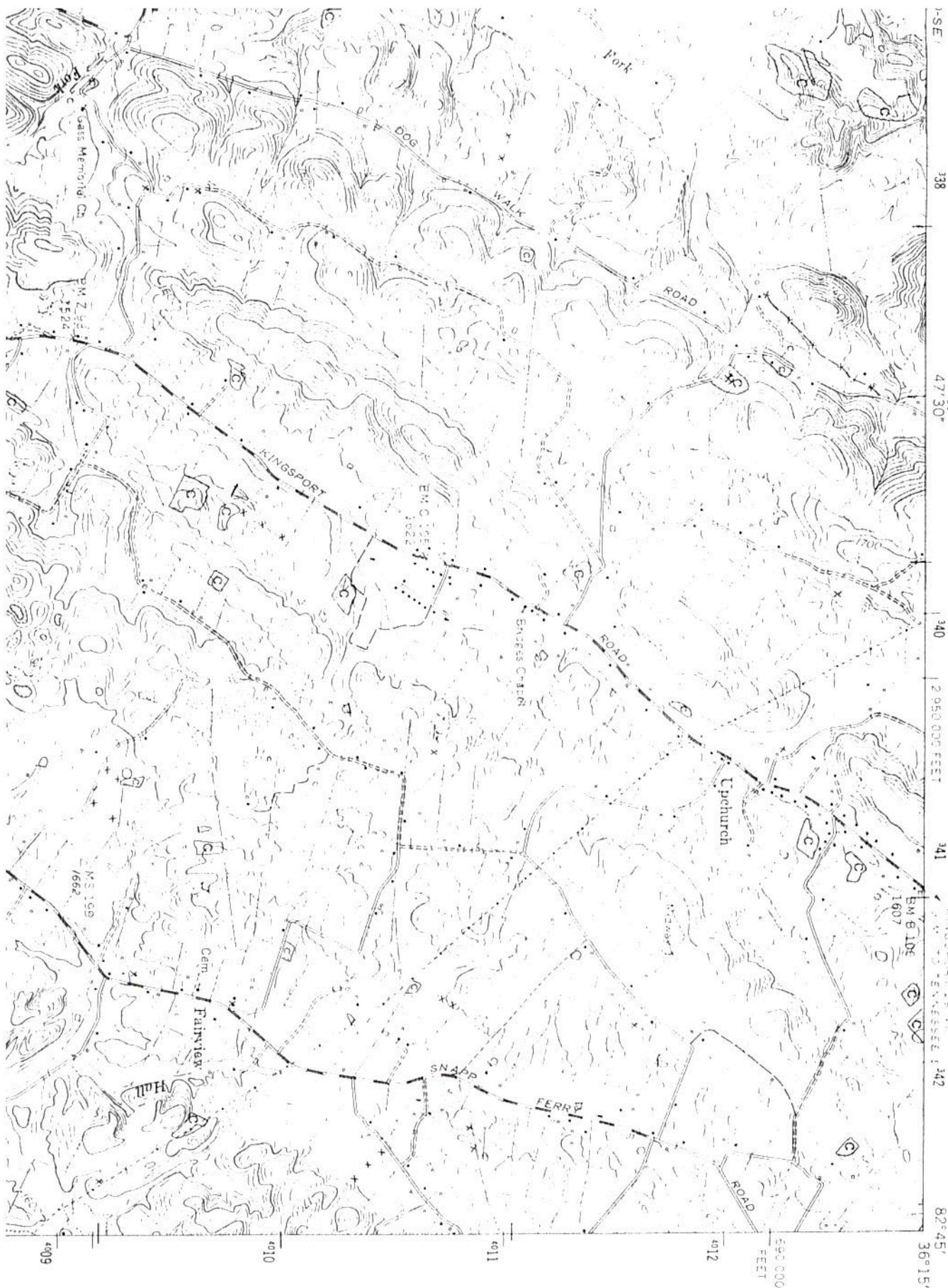
2/16/81

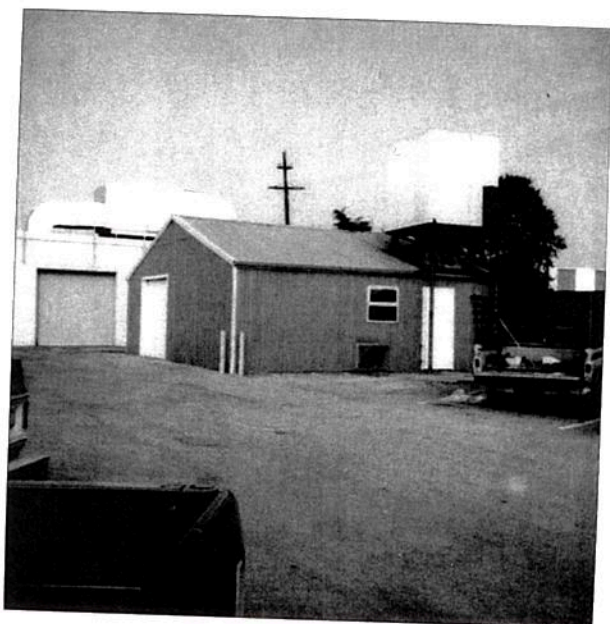


ATES
Y AUTHORITY
YS BRANCH

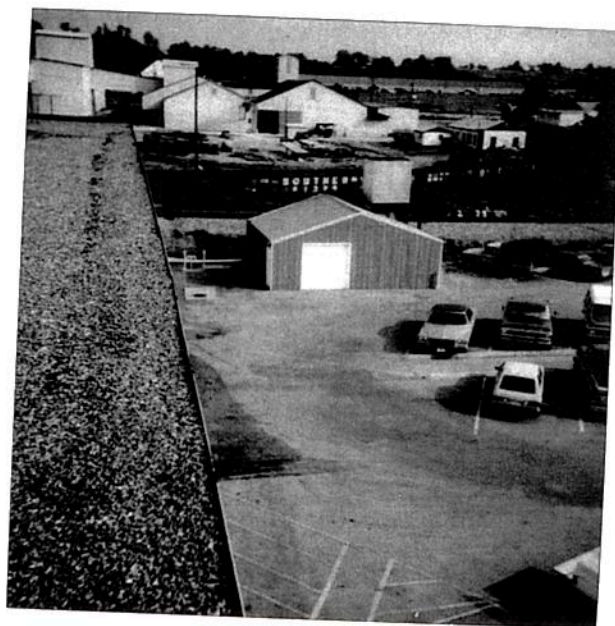
GREENEVILLE QUADRANGLE
TENNESSEE-GREENE CO.
7.5 MINUTE SERIES (TOPOGRAPHIC) 181-NE

4456 1 SW
JEAROLDSTOWN 189-SW

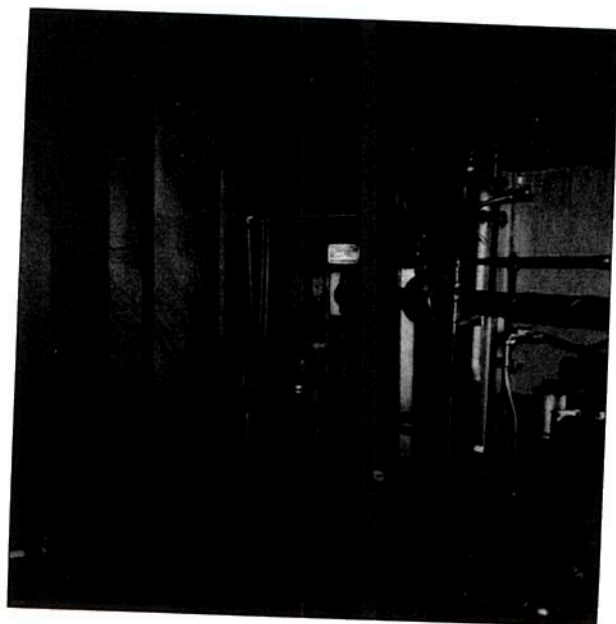




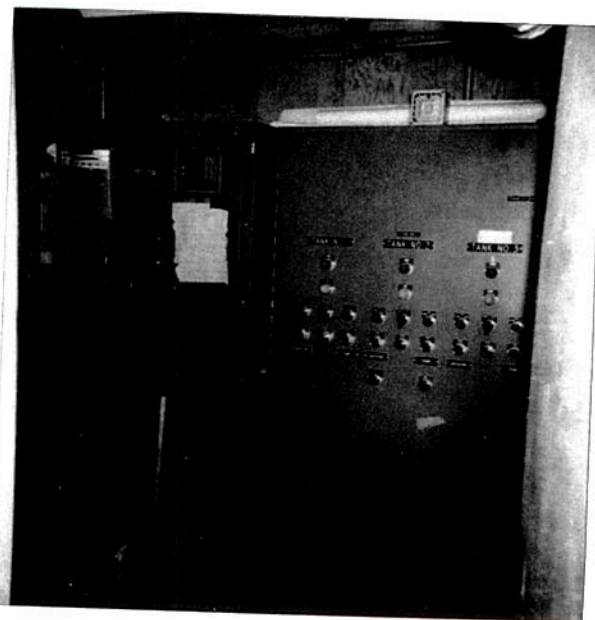
EAST SIDE VIEW, INCINERATOR
BUILDING AND EQUIPMENT.



SOUTH SIDE VIEW, INCINERATOR
BUILDING



INSIDE VIEW OF INCINERATOR
BUILDING - PIPING AND SUPPLY
EQUIPMENT



INCINERATOR BUILDING -
ELECTRICAL CONTROL PANEL

December 7, 1983

618-622-1181

Mr. J. D. Miller
Maintenance Manager
Huyck Formex
Division of BTR Paper Group
P. O. Box 330
Greeneville, Tennessee 37743

Re: Withdrawal of the hazardous waste permit application for Huyck Formex
TND003375441

Dear Mr. Miller:

This letter is to notify you that your hazardous waste permit application (Part A) has been withdrawn pursuant to your request. It has now been designated as inactive. This final action was taken as a result of our receiving concurrence from our field staff agreeing that you no longer need interim status.

Please recognize that withdrawal of your Part A permit application and hence your interim status means that you are no longer authorized to operate as a hazardous waste treatment, storage, or disposal facility. If in the future you wish to conduct such operations, you must first apply for and obtain a permit from this Department.

If this office can be of any further assistance, please call or write.

Sincerely,

Tom Tiesler, Director
Division of Solid Waste Management

TT/MEC/dgw SW-38

cc: EPA Region IV ✓
Johnson City Field Office
Greene County Health Department
First Tennessee Regional Health Office

RECORD OF COMMUNICATION

☒ PHONE CALL
 ☐ DISCUSSION
 ☐ FIELD TRIP
 ☐ CONFERENCE
☐ OTHER (SPECIFY)

(Record of item checked above)

TO:

FROM:

DATE

11-14-83

TIME

10:20 AM

HUYCK FORMEX

L. WOOSLEY

SUBJECT

TWD 603375471, Greenville, TN

SUMMARY OF COMMUNICATION

REQUEST FOR WITHDRAWAL OF PART A APPLICATION

CONTACTED S.D. MILLER, MAIN. MGR. - THEY NEED TO
SEND WITHDRAWAL REQUEST - WILL DO.

called again 12/23/83 no answer

Called again 12/29/83 no answer

called. C.E. OYSEN 12/29/83 9A-556-2021*

ANDY SCHALOUX 12/29/83 615-639-1181

called 2/1/84 Mr. Chaloux

*no longer responsible

CONCLUSIONS, ACTION TAKEN OR REQUIRED

AWAIT W/D REQUEST

INFORMATION COPIES

TO:



BTR Paper Group

P.O. BOX 330 • GREENEVILLE, TENNESSEE 37743
TEL: 615 639-1181 • TELEX: 553-429

January 31, 1984

Mr. James H. Scarbrough
Chief
Residuals Management Branch
United States Environmental Protection Agency
Region IV
345 Courtland Street
Atlanta, Georgia 30365

Dear Mr. Scarbrough:

REFERENCE: Withdrawal of the Hazardous Waste Permit Application
for Huyck Formex - TND003375441

The Hazardous Waste Permit Application (Part A) for Huyck Formex has been withdrawn by the Tennessee Department of Health and Environment. This action was taken due to a waste water analysis test which concluded that our facility does not generate or treat a hazardous waste.

This letter is our official request that the Federal EPA Hazardous Waste Permit Application (Part A) be withdrawn.

If there are any further requirements, please advise.

Sincerely yours,

J. D. Miller
Maintenance Manager
HUYCK FORMEX, DIVISION OF BTR PAPER GROUP

/we

cc - G. BEATTY (SPD COMPLIANCE ACTION)

RECORD OF COMMUNICATION

☒ OTHER (SPECIFY)

☐ FIELD TRIP

☐ CONFERENCE

TO:

LARRY LEFORD
TDSWM

(Record of item checked above)

FROM:

LOYD WOOSLEY

DATE

2/22/84

TIME

12:45pm

SUBJECT

HUYCK FORMER - WITHDRAWAL

SUMMARY OF COMMUNICATION

ADVISED LARRY THAT WE NEED CORROSIVITY AND
EP TOXICITY DATA TO VERIFY THAT WASTE IS
CHARACTERISTICALLY NOT HAZARDOUS. I HAD DISCUSSED
IT BRIEFLY w/ WAYNE GREGORY ? HE WANTED
STATE TO TAKE LEAD ON THIS. WE WILL NOT
PROCESS W/D UNTIL DATA AVAILABLE.

CONCLUSIONS, ACTION TAKEN OR REQUIRED

1. LARRY WILL WORK w/ KINGSPORT OFFICE TO OBTAIN
DATA
2. HOLD EPA WITHDRAWAL UNTIL DATA
AVAILABLE

INFORMATION COPIES

TO:

RECORD OF
COMMUNICATION

☒ OTHER (SPECIFY)

(Record of item checked above)

TO:

FROM:

DATE

TIME

BETSY WILLIS

LLOYD WOXLEY

2/10/84

SUBJECT

HUYCK FORMEX - WITHDRAWAL

SUMMARY OF COMMUNICATION

THEY HAVE REQUESTED WITHDRAWAL - I TOLD
COMPLIANCE TO STOP A.D.

WITHDRAWAL APPEARS TO QUALIFY FOR A MIXTURE
OF ~~WASTE~~ SPENT SOLVENTS AND DOES NOT CONSTITUTE
A LISTED WASTE (SAFETY-KLEEN) I agree

But company only looked at Ignitable characteristic
Corrosibility & EP Toxicity should've been done
rather than priority pollutants. Dyes often
have heavy metals. Further testing should be
done on representative samples.

CONCLUSIONS, ACTION TAKEN OR REQUIRED

I WILL PROCEED TO HAVE TERRI ISSUE PUBLIC
NOTICE WITH YOUR CONCURRENCE -
TN HAS WITHDRAWN THEIR PART A 12/7/83

INFORMATION COPIES

TO:



CERTIFIED MAIL # P672 906 183
RETURN RECEIPT REQUESTED

TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT

Bureau of Environment
T.E.R.R.A. BUILDING
150 NINTH AVENUE, NORTH
NASHVILLE, TENNESSEE 37203

August 17, 1984

Mr. J. D. Miller
Huyck Formex
P. O. Box 330
Greeneville, TN 37743

Re: Tentative Decision to Deny a Treatment/Storage Permit
Huyck Formex
Greeneville, TN
EPA I.D. # TND 00 337 5441

Dear Mr. Miller:

I have made the tentative decision to deny the permit for treatment and storage of hazardous wastes to the Huyck Formex facility. This decision is based upon your decision to withdraw your Part A application from further action.

A Public Notice was issued on August 14, 1984. If you believe that the decision to deny this permit is inappropriate, it is your responsibility to raise all ascertainable issues and submit all available arguments and factual grounds supporting your position by the end of the public comment period. Enclosed for your information is a copy of the Notice of Intent to Deny a Permit and the Fact Sheet prepared by this Division.

Please contact Mr. Wayne Gregory, of the Permits and Quality Assurance Section, if you have any questions regarding this action.

Sincerely yours,

A handwritten signature in cursive script, appearing to read "Tom Tiesler", is written over the typed name.

Tom Tiesler, Director
Division of Solid Waste Management

TT/bec SW-105

cc: Betty Willis - EPA Region IV
SWM - Johnson City Field Office
Greene County Health Dept.
First Tennessee Region

RECORD OF COMMUNICATION

☒ PHONE CALL ☐ DISCUSSION ☐ FIELD TRIP ☐ CONFERENCE
☐ OTHER (SPECIFY)

TO:

SUZI RIDDLE/DALE HALE
TN - JOHNSON CITY

(Record of item checked above)

FROM:

LLOYD WOOLLEY

DATE

1/13/84

TIME

11:00 am

SUBJECT

HUYCK FORMER - WITHDRAWAL OF PART A

3:00 pm

SUMMARY OF COMMUNICATION

~~WAS NOT HAZARDOUS AND NEVER HAZARDOUS~~

RAYESTER NYLON FORMIC FABRIC - treated w/

VARIOUS solvents + Dies → tanks w/ agitation

→ incineration

analysis: 1,1 Trichloroethane 280 ppb

1,2 Dichloroethane 21 ppb

1,1 Dichloroethylene 16 ppb

{ 25% H₂O

+ 80%

{ 75% Formaldehyde < → 0.5%

1% ethanol

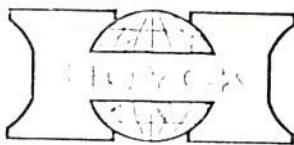
+ metha

CONCLUSIONS, ACTION TAKEN OR REQUIRED

Flash pt > 140°

INFORMATION COPIES

TO:



HUYCK FORMTEX
Division of Huyck Corporation

P.O. BOX 330 • GREENEVILLE, TENNESSEE 37743
TEL: 615 639-1181 • TELEX: 553-429

February 5, 1976



Mr. Darrell S. Hale
First Tennessee Regional Health Office
P O Box 3888-CRS
Johnson City, Tennessee 37601

Ref.: Letter to Ron Blevins - December 29, 1975

Dear Mr. Hale:

In reply to your letter to Mr. Ronald L. Blevins concerning a chemical analysis of our waste solution, this information was not readily available at this facility and had to be acquired from the Manufacturer; thus causing a delay in meeting your January 23, 1976 date.

I do now have this information as follows:

Solution #1	25.0% Water
	75.0% Resin Polymer (Resorcinol & Formaldehyde)
Solution #2	80.0% Tri-Methylated Methylol Melamine
	.5% Free Formaldehyde
	1.0% Methanol
	18.5% Water
Solution #3	46.0% Urea Crystals
	64.0% Water

If other information is required, please contact me.

Very truly yours,

W. D. Burnett
Maintenance Engineer

WDB/km

cc: H. Buck, R. Blevins



STATE OF TENNESSEE
DEPARTMENT OF ENVIRONMENT AND CONSERVATION

900 NORTH STATE OF FRANKLIN ROAD
JOHNSON CITY, TENNESSEE 37604

February 20, 1992

Mr. W. K. Miller
Huyck - Formex
Division of BTR Paper Group
P. O. Box 1030
Greeneville, Tennessee 37744

RE: UST Closure
Huyck - Formex
Facility ID# 1-300384

Dear Mr. Miller:

The Tennessee Division of Underground Storage Tanks has received the results from the analyses of soil samples collected during the above referenced petroleum underground storage tank system closure. Upon review, it appears that all the analytical results document that the concentrations of total petroleum hydrocarbons (TPH) in the remaining soil are below the regulatory clean-up levels. Based on the above referred analytical data, the one (1) 30,000 gallon fuel oil tank can be considered closed at this location. Consequently, the Division does not see the necessity for further investigation, clean-up, or enforcement but will reserve the right to initiate additional action should a problem become apparent in the future.

If you have any questions or comments, please call me at 615/928-6487.

Sincerely,

Stanley R. Boyd
Geologist
Division of Underground Storage Tanks

SRB/14052050

SITE CLOSURE

cc: Mr. James J. Belgeri, Westinghouse Environmental
Nashville File
Closure File 1-300384

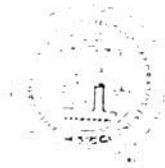


IT CORPORATION

IT ANALYTICAL SERVICES

STEWART LABORATORIES DIVISION

5815 Middlebrook Pike • Knoxville, Tennessee 37921 • 615-588-6401



CERTIFICATE OF ANALYSIS

TO Huyck-Formex
 ATTN: J. D. Miller
 P. O. Box 330
 Austin Street Plant
 Greeneville, IN 37743

DATE REPORTED August 15, 1983
 PROJECT CODE HUY 16615
 ORDER NUMBER 98938

✓
 100

VOLATILE ORGANIC PRIORITY POLLUTANT ANALYSIS

Sample Description: Incinerator Solution, Holding Tank, 7/07/83, 9:30 a.m.

Compound	Concentration (ppb)	Compound	Concentration (ppb)
acrolein	ND	trans-1,3-dichloropropylene	ND
acrylonitrile	ND	ethyl benzene	23.
benzene	320.	methyl bromide	ND
bromoform	ND	methyl chloride	ND
carbon tetrachloride	ND	methylene chloride	500. ✓
chlorobenzene	ND	1,1,2,2-tetrachloroethane	<10.
chlorodibromomethane	ND	tetrachloroethylene	<10.
chloroethane	<10.	toluene	1000. ✓
2-chloroethyl vinyl ether	ND	trans-1,2-dichloroethylene	ND
chloroform	17.	1,1,1-trichloroethane	3400.
dichlorobromomethane	ND	1,1,2-trichloroethane	ND
dichlorodifluoromethane	ND	trichloroethylene	ND
1,1-dichloroethane	280.	trichlorofluoromethane	ND
1,2-dichloroethane	21.	vinyl chloride	ND
1,1-dichloroethylene	16.		
1,2-dichloropropane	ND		
cis-1,3-dichloropropylene	ND		

Remarks: ND = Not Detected

<10 ppb = Detected but at a level less than 10 ppb (parts per billion).

Sworn to and subscribed before me this 15th

day of August, 1983

My commission expires December 14, 1983

[Signature]

Notary Public

[Signature]
 Title Laboratory Manager

Approved By



Accredited by the American Association for Laboratory Accreditation in the chemical field of testing as listed in the current AAA Directory of Accredited Laboratories



IT CORPORATION

IT ANALYTICAL SERVICES

STEWART LABORATORIES DIVISION

5815 Middlebrook Pike • Knoxville, Tennessee 37921 • 615-588-6401



CERTIFICATE OF ANALYSIS

TO: Huyck-Formex
ATTN: J. D. Miller
P. O. Box 330
Austin Street Plant
Greeneville, TN 37743

DATE REPORTED August 15, 1983
PROJECT CODE HUY 16615
ORDER NUMBER 98938

Sample Description: One (1) wastewater sample received July 8, 1983

Incinerator Solution
Holding Tank, 7/07/83, 9:30 a.m.

Flash Point (Tag Closed Cup)

>211°F

Sworn to and subscribed before me this 15th
day of August, 1983

My commission expires December 14, 1983

Notary Public

Title

Laboratory Manager

Approved By



Accredited by the American Association for Laboratory Accreditation in the chemical field of testing as listed in the current AALA Directory of Accredited Laboratories

Hazardous Waste Inspection Report

Site/Operation Inspected:

Huyck Formex
TND 003375441
P.O. Box 330 (Austin St.)
Greeneville, Tennessee 37743

Owner/Operator/Primary Contact:

Huyck Formex Division of BTR Paper Group
Mr. Jarrell D. Miller, Maintenance Manager

Date and Time of Inspection:

June 29, 1983, starting at 10:00 A.M.

Other Inspection Participants and Affiliations:

None

Report Prepared By:

Ray E. Osejo
First TN Regional Health Office
Division of Solid Waste Management
Johnson City, Tennessee 37601
Phone: (615) 928-8301

Purpose of Inspection:

This routinely scheduled full inspection was conducted to evaluate Huyck Formex's compliance with applicable requirements of the Rules Governing Hazardous Waste Management in Tennessee. No samples were taken during this inspection.

Facility Description:

Huyck Formex manufactures polyester and nylon forming fabrics for use on paper machines. Part of their process involves treating the woven fabric with a dilute aqueous solution of acrylonitrile, 1, 1 dichloroethylene, resorcinol, methanol, and formaldehyde. The waste from this process, sometimes contaminated with organic dyes used to color the fabrics, is pumped into one of three underground storage tanks, equipped with agitation devices to help keep the solids and dyes in suspension until enough waste is accumulated to begin incinerating the waste (<90 days).

The incinerator is fired by natural gas and operated at approximately 1400°F, which results in a clean, complete combustion of the waste. According to Mr. Miller, there are no metals in the waste and subsequently, no ash or residue from the incinerator. The incinerator stack emissions are currently permitted by the Division of Air Pollution Control (Permit #0174921, issued March 16, 1982).

In light of the above, and pending written certification of this information, along with analysis results of the waste (the Division will be present during samplings), the company's waste treatment solution is not a hazardous waste, and therefore Huyck Formex is not subject to regulation under the Tennessee Hazardous Waste Management Act for its incineration of the waste.

Inspection Findings:

No violations were found; Huyck Formex does not generate or treat a hazardous waste as reflected on their current Part A permit application and should request withdrawal of interim status.

Signed: _____

Ray E. Osejo

Date: _____

July 1, 1983



BTR Paper Group

P.O. BOX 330 • GREENEVILLE, TENNESSEE 37743
TEL: 615 639-1181 • TELEX: 553-429

August 26, 1983

RECEIVED

Division of Solid Waste Management
Date 8/29/83 File No. _____
Received by _____

Mr. Bobby Morrison
Division of Solid Waste Management
150 Ninth Avenue North
Nashville, Tennessee 37203

Dear Mr. Morrison:

I am replying to your letter, dated July 21, 1983, requesting financial assurance information for hazardous waste management facilities.

No financial assurance papers have yet been filed with your office due to uncertainty about our facility requiring a permit under the Hazardous Waste Management Act in Tennessee.

Mr. Ray Osejo from the Johnson City, Tennessee office, visited our Greeneville, Tennessee plant on June 29, 1983, for an inspection of our waste water incinerator system (attached is a copy of Mr. Osejo's inspection report).

Due to the low levels of chemical concentration and types of chemicals used in our fabric treatment process, there was reason to believe that our facility would not need to be subject to the hazardous waste regulations. To confirm the exact chemicals and waste to be incinerated, a waste water sample was taken by Mr. Osejo on July 7, 1983, and sent to Stewart Laboratories in Knoxville, Tennessee for a Volatile Organic Priority Pollutant Analysis and Flash Point - Tag Closed Cup Test.

Stewart Laboratories has completed its analysis report. Attached is a copy of the complete report, dated August 15, 1983. I discussed the report with Mr. Osejo on August 24, 1983, and briefed him on the waste parts per billion concentration levels. Ray did not see any problem with the test analysis report.

Since the recent inspection and testing of waste water samples have revealed that Huyck Formex does not generate or treat a hazardous waste, we are requesting withdrawal of our current interim status from the current Part A Permit Application.

Please advise if there are any other questions or information needed for the withdrawal of interim status. Please advise if a separate request must



Mr. Bobby Morrison
August 26, 1983
Page 2 -

also be sent to the Federal EPA Office in Atlanta, Georgia.

Thank you for your assistance and the help of Mr. Osejo on his recent visit to our plant.

Sincerely,

J. D. Miller
Maintenance Manager
HUYCK FORMEX DIVISION OF BTR PAPER GROUP

/fr

Attachments

cc: Mr. Ray E. Osejo
First Tennessee Regional Health Office
Division of Solid Waste Management
Johnson City, Tennessee 37601



Certified Mail #P669 555 258
Return Receipt Requested

TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT
CUSTOMS HOUSE
701 BROADWAY
NASHVILLE, TENNESSEE 37219-5403

September 28, 1984

Mr. J. D. Miller
Huyck Formex
P. O. Box 330
Greeneville, TN 37743

RE: Notification to terminate interim status and denial of a permit for Huyck
Formex #TND 00 337 5441

Dear Mr. Miller:

Enclosed is the notification of interim status termination and denial of a permit for Huyck Formex located on Austin Street in Greeneville, Tennessee, TND 00 337 5441. This notification constitutes a final permit decision under Rule 1200-1-11-.07(7)(f) of the "Rules Governing Hazardous Waste Management in Tennessee". Please be advised that you may appeal, to the Solid Waste Disposal Control Board, this decision to terminate interim status and deny the permit as specified in T.C.A. 68-46-113(a)(2).

This action to deny the permit and terminate interim status shall become final and not subject to review unless Huyck Formex petitions the Commissioner of the Department of Health and Environment no later than thirty (30) days after service of this notice.

If I can be of any further assistance, please call or write.

Sincerely,

Tom Tiesler, Director
Division of Solid Waste Management

TT/bec/Hold-3

cc: Betty Willis - EPA Region IV ✓
SWM - Johnson City Field Office
Greene County Health Dept.
First Tennessee Region

NOTICE OF INTERIM STATUS TERMINATION
AND DENIAL OF A PERMIT

Effective Date of this Determination: Upon receipt of this Notice

Facility Name: Huyck Formex/Division of BTR Paper Group

Installation Identification Number: TND 00 337 5441

Location: Austin Street
Greeneville, TN 37743

Facility Owner: BTR Paper Group
P. O. Box 330
Greeneville, TN 37743

Facility Operator: Huyck Formex
Austin Street
Greeneville, TN 37743

After due consideration of the facts applicable to and the requirements and policies expressed in the Tennessee Hazardous Waste Management Act and appropriate regulations, the Commissioner has determined that the interim status of this facility should be terminated and the permit denied.

Huyck Formex is hereby advised that in accordance with T.C.A. 68-46-113(a)(2) it may secure a review of the necessity for or reasonableness of this action by filing with the Commissioner, a written petition setting forth the grounds and reasons for objection and asking for hearing in the matter involved before the Solid Waste Disposal Control Board. The hearing will be held in accordance with T.C.A. 4-5-101 et seq., and Huyck Formex has the right to be represented by counsel.

The administrative record with respect to this determination is maintained at the Division of Solid Waste Management, 701 Broadway, 4th Floor, Custom House, Nashville, Tennessee 37203.


Tom Tiesler, Director
Division of Solid Waste Management

Date of delivery shown by returned receipt _____

EC/bec/SWM-H-11

NOTICE OF INTERIM STATUS TERMINATION

Facility Name: Huyck Formex

EPA I.D. Number: TND 003 375 441

Location: Austin Street
Greenville, Tennessee

Landowner: Huyck Formex

Facility Operator: Same as above

After due consideration of the facts applicable to the above-named facility as it appears in the administrative record and the requirement and policies expressed in the Resource Conservation and Recovery Act (RCRA) and appropriate regulations, I have determined that the interim status of this facility should be terminated with no substantial changes from the tentative determination previously announced.

The administrative record with respect to this determination is maintained at the Agency's offices, 345 Courtland Street, N.E., Atlanta, Georgia 30333 and is available for public inspection between the hours of 8:15 a.m. and 4:30 p.m., Monday through Friday. For further information on this permit action, contact Ms. Elaine Houston at the above address.

Thomas W. Devine
Director
Air and Waste Management Division

Date



Betty

TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT

Bureau of Environment
T.E.R.R.A. BUILDING
150 NINTH AVENUE, NORTH
NASHVILLE, TENNESSEE 37203

October 20, 1983

Mr. J. D. Miller
Maintenance Manager
Huyck Formex
Division of BTR Paper Group
P. O. Box 330
Greeneville, Tennessee 37743

Re: Withdrawal of the hazardous waste permit application for Huyck Formex, TND
003375441

Dear Mr. Miller:

This letter is to acknowledge receipt of your request for withdrawal of your application for a permit under the Tennessee Hazardous Waste Management Act, as amended, TCA 53-6301, et. seq. Your letter indicated that the waste which you generate has been determined to be non-hazardous, and therefore, you no longer need a permit to store hazardous wastes in tanks or to treat hazardous waste by incineration.

It has been our general experience that the hazardous waste regulations and subsequent amendments that have been adopted since the effective date of the regulations have caused confusion and have been subjected to misinterpretations. This confusion on the part of the regulated community has been compounded, due to the State's and EPA's overlapping responsibilities for implementation of the hazardous waste regulatory program during the period of interim authorization.

Withdrawal of your permit application constitutes revocation of interim status, as discussed in Rule 1200-1-11-.07(3)(e) of the "Rules Governing Hazardous Waste Management in Tennessee".

In light of the foregoing, our plans are to proceed as follows. We will place your permit application in our "suspense" file. This action, in essence, revokes your interim status. However, your request will be reviewed by our field office. If they agree that you do not need a permit, we will notify you of this determination, your application will be formally withdrawn, and inactivated.

Mr. Miller
Page Two
October 20, 1983

Finally, your request to withdraw interim status means that you may not treat, store, or dispose of hazardous waste without a permit.

If for any reasons you wish to reconsider this withdrawal request, please advise this office within the next 10 days. If you need further clarification, please contact Wayne Gregory of my staff at (615) 741-3424.

Sincerely,

Tom Tiesler, Director
Division of Solid Waste Management

TT/LL/dgw SW-30

cc: SWM - Johnson City Office
EPA - Region IV
Greene County Health Department
First Tennessee Regional Office

FACT SHEET

Intent to Deny a Permit

Activity to be Permitted:

Treatment and Storage of Hazardous
Waste

Facility Name:

Huyck Formex/Division of BTR Paper
Group

EPA I.D. Number:

TND003375441

Location:

Austin Street, Greeneville, TN 37743

Facility Operator:

BTR Paper Group

Comment Period:

Begins August 14, 1984
Ends September 27, 1984

All persons, including the applicant, who believe that the tentative decision to deny this permit is inappropriate must raise all ascertainable issues and submit all available arguments and factual grounds supporting their position by September 27, 1984. Comments should be sent Mr. Tom Tiesler, Director, Division of Solid Waste Management, Tennessee Department of Health and Environment, Custom House, 4th Floor, 701 Broadway, Nashville, Tennessee 37203 (615) 741-3424.

Closure of the Facility:

The facility has operated under interim status and has currently been granted withdrawal which will be final once the permit is denied. If this tentative decision to deny the permit becomes the final administrative disposition of the permit application, interim status will terminate (Rule 1200-1-11-.07(3)(e)) and the administrative procedures for closure of the facility, if applicable, will begin immediately.

Facilities whose closure plan has not been approved as part of a hazardous waste permit must comply with the provisions of Rule 1200-1-11-.05(7) of the Rules Governing Hazardous Waste Management in Tennessee.

The owner or operator must submit his final closure plan to Tom Tiesler, Director, Division of Solid Waste Management, no later than 15 days after termination of interim status, which satisfies the requirements of Rule 1200-1-11-.05(7)(c), if not previously approved.

Review and approval of the closure plan will include a public notice which provides the public with an opportunity to submit written comments on the plan or request modifications of the plan.

After approval of the closure plan, the owner or operator must remove from the site, all hazardous wastes in accordance with that plan. The closure plan will be reviewed by the Tennessee Department of Health and Environment in coordination with the Environmental Protection Agency.

Reasons Supporting the Decision to Deny the Permit Application

The company has decided to withdraw their interim status rather than submit a formal permit application.

PUBLIC NOTICE

U. S. ENVIRONMENTAL PROTECTION AGENCY
REGION IV
RESIDUALS MANAGEMENT BRANCH
345 Courtland Street, N.E.
Atlanta, Georgia 30365
404/881-3433

PUBLIC NOTICE NO.

DATE: September 13, 1984

NOTICE OF INTENT TO DENY A PERMIT UNDER
THE RESOURCE CONSERVATION AND RECOVERY ACT

The Environmental Protection Agency (EPA) proposes to deny the permit for storage and treatment of hazardous waste to the Huyck Formex facility located at Austin Street, Greeneville, Tennessee. The permit is to be denied under authority of the Resource Conservation and Recovery Act (RCRA). The basis for this decision is the determination that the applicant's wastes do not qualify as hazardous. The facility has been assigned EPA identification number TND 003 375 441.

The facility is currently operating under interim status. If this tentative decision to deny the permit becomes the final permit decision, interim status will terminate on the date the permit is officially denied.

The administrative record for this permit decision consists of the permit application, notice of intent to deny the application, and Statement of Basis. The administrative record and related information may be reviewed and/or copied at the EPA office between the hours of 8:15 a.m. and 4:30 p.m., Monday through Friday. A copying machine is available for public use at a charge per page. An additional copy of the application, notice of intent to deny the permit, and statement of basis will be available for review at:

Tennessee Department of Health & Environment
Customs House, 4th Floor
701 Broadway
Nashville, Tennessee 37204
615/741-34244

and

Division of Solid Waste Management
1233 Southwest Avenue Extension
Johnson City, Tennessee 37601
615/928-8301

To obtain further information including copies of the intent to deny the permit, statement of basis, or the application please contact:

Ms. Earline Hanson
U. S. Environmental Protection Agency
345 Courtland Street, N.E.
Atlanta, Georgia 30365
404/881-3544

All persons who believe that the tentative decision to deny this permit is in appropriate must raise all reasonably ascertainable issues and submit all reasonably available arguments and factual grounds supporting their position by October 28, 1984. Duplicate copies of such comments should be sent to the Environmental Protection Agency, ATTENTION: Mrs. Earline Hanson. All comments will be considered in making the final decision.

Public hearings will be held if EPA receives written notice of opposition to the proposed decision and a request for a hearing by October 28, 1984. Any request for a hearing must be in writing and must state the nature of the issues proposed to be raised in the hearing.

After consideration of all written comments received, and of the requirements of RCRA and appropriate regulations, the EPA Regional Administrator will make a final permit decision on this facility. If the determination is substantially unchanged from that announced by this notice, the EPA Regional Administrator will so notify all persons submitting written comments or requesting notice of final determination. If the determination substantially changes, the EPA Regional Administrator will issue a public notice indicating the revised determination.

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30-SECOND ANNOUNCEMENT

THE U.S. ENVIRONMENTAL PROTECTION AGENCY IS PROPOSING TO DENY THE PERMIT REQUEST BY HUYCK FORMEX TO STORE AND TREAT HAZARDOUS WASTES AT THE FIRM'S FACILITY IN GREENEVILLE, TENNESSEE. THIS WOULD TERMINATE THE FACILITY'S INTERIM STATUS UNDER THE RESOURCE CONSERVATION AND RECOVERY ACT. INFORMATION REGARDING THE DECISION MAY BE REVIEWED AT EPA, OR AT THE TENNESSEE DEPARTMENT OF HEALTH AND ENVIRONMENT IN NASHVILLE OR JOHNSON CITY. IF YOU FEEL A PUBLIC HEARING SHOULD BE HELD, WRITE EPA AT 345 COURTLAND STREET, N.W. ATLANTA, GEORGIA 30365: ATTENTION: MRS. EARLINE HANSON OR CALL 404/881-3544.

###

STATEMENT OF BASIS

Intent to Terminate Interim Status under RCRA

Activity: Storage and Treatment

Facility Name: Huyck Formex

EPA I. D. Number: TND 003 375 441

Location: Austin Street
Greeneville, Tennessee 37743

Landowner: Huyck Formex
Greeneville, Tennessee 37743

Facility Operator Huyck Formex Division of BTR Paper Group
Mr. C. E. Olson
Vice President, Manufacturing
Austin Street
Greeneville, Tennessee 37743

Comment Period Begins: September 13, 1984
Ends: October 28, 1984

All persons, including the applicant, who believe that the tentative decision to deny this permit is inappropriate, must raise all ascertainable issues and submit all available arguments and factual grounds supporting their position by October 25, 1984. Two copies of such comments should be sent to the

U. S. Environmental Protection Agency
ATTENTION: Ms. Earline Hanson
345 Courtland Street, N.E.
Atlanta, Georgia 30365
404/881-3544

Procedures for Requesting a Hearing

A public hearing will be held if EPA receives written notice of opposition to the proposed permit decision and a request for a hearing by October 28, 1984. Any request for a hearing shall be in writing and state the nature of the issues proposed to be raised in the hearing. Requests for a hearing should be submitted to:

U. S. Environmental Protection Agency
ATTENTION: Ms. Earline Hanson
345 Courtland Street, N.E.
Atlanta, Georgia 30365
404/881-3544

Reasons Supporting Decision to Terminate Interim Status

On July 14, 1983, EPA formally requested Huyck Formex to submit Part B of the RCRA permit application. EPA regulations [40 CFR §270.10(e)(4)] state that any operator shall be allowed at least six months from the date of the request submit to Part B of the application. EPA established a due date of January 18, 1983. On August 23, 1984, a request for withdrawal was submitted to the State of Tennessee by the facility. On July 20, 1984, the State of Tennessee made the tentative decision to deny the permit for this facility based on information submitted about their wastes. It was concluded from this information that the wastes do not qualify as hazardous. EPA believes this is a sufficient basis for denial of the permit.

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SITE SAFETY PLAN

SAFETY PLAN	
Site Name: Weavexx Facility	Contact: Steve Burton, UST Section (404) 562-9466
Address: 124 Austin Street, Greeneville, TN 37745-3953	
Phone Number: -	
Purpose of Visit: Collection of soil samples and groundwater samples from existing monitoring wells following UST removal activities.	
Proposed Date of Work: Week of 7/23/01	
Directions to Site: See attached map.	

SITE INVESTIGATION TEAM:

PERSONNEL *	SAFETY CATEGORY	RESPONSIBILITIES
Maria Labrador	<i>B job</i>	Project Leader, Sampler
J. Steve Hall	<i>B job</i>	Safety Officer, Sampler
* All employees have been trained/medically monitored in accordance with OSHA 29 CFR 1910.120 requirements and US-EPA Region IV Field Health and Safety Manual, 1990 edition.		

PLAN PREPARATION:

Prepared by:	Maria Labrador <i>by M. Labrador</i>	Date: 7/13/01 7/18/01
Reviewed/Approved by:	<i>James C. Gray</i>	Date: 7-18-01
Section Chief:	<i>A. H. Hall</i>	Date: 7-18-01

SITE STATUS:

Active	√	Inactive	Unknown
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EMERGENCY INFORMATION:

Local Resources:

Ambulance (Name):	Phone: 911
Hospital (Name): Laughlin Memorial Hospital	Phone: (423) 787-5000
Police (Local or State):	Phone: 911
Fire Department:	Phone: 911

Office Resources:

OFFICE/POINT of CONTACT	WORK PHONE	HOME PHONE
SESD Office - Haz. Waste Section	(706) 355-8603	
EPA - Emergency Response - Atlanta	(404) 562-8700	
SHEM - Betty Kinney	(706) 355-8511	(770) 725-2023
Branch Safety Officer - Jim Gray	(706) 355-8613	(706) 742-8467

EMERGENCY CONTACTS:

Poison Control Center	Phone: (800) 282-5846
National Response Ctr. (ENVIRONMENTAL EMERGENCY ONLY)	Phone: (800) 424-8802

Directions to Hospital (Attach Map if Available): See attached map.

SAFETY AND HEALTH RISK ANALYSIS

Waste Types/Chemicals (Attach MSDS for each):
Waste coating solutions containing a variety of chemicals, including MEK and TCE.

HAZARD EVALUATION:

Known or Suspected Hazardous/Toxic Materials (If applicable include: PEL/IDLH and/or TLV-TWA/TLV-STEL, LEL, flammability, odor, reactivity, stability, corrosivity)
See attached MSDSs.

OVERALL HAZARD:

SERIOUS	MODERATE <input checked="" type="checkbox"/>	LOW	UNKNOWN
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SITE PERIMETER ESTABLISHMENT:

Map/Sketch attached?	NA
Perimeter identified?	NA
Zone(s) of contamination identified?	NA

RECOMMENDED LEVEL(S) OF PROTECTION:

Level of Protection: (check those that apply)	LEVEL A	LEVEL B	LEVEL C	LEVEL D <input checked="" type="checkbox"/>
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Modifications:

Respiratory:	NONE
Field Dress:	NONE

Monitoring Procedures/Equipment*:

√	TVA® 1000 PID/FID		OVA® FID
	Rae® PID		MicroTip® PID
	CN Monitor		Halogen
√	Radiation Survey Meter	√	LEL/Oxygen
	Other, Specify:		

- * All instruments are calibrated in accordance with the U.S. Environmental Protection Agency, Region 4, Environmental Investigations Standard Operating Procedures and Quality Assurance Manual, May 1996, or according to the manufacturer's specifications.

Method of Air Surveillance: SEE ABOVE
Additional Site Specific Information/Stipulations: NA
Site Decontamination Procedures: NA

Confined Space Entry (check one)	YES	NO	√
If yes, define procedures to be used:			